

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET

5/12/16

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1				1	
2		1				1
3	1					1
4	1					1
5	1				1	
6		2				2
7		2				2
8	2					2
9	2					2
10	2					2
11	2					2
12	2					2
13	1				1	
14						1
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49						
50						
TOTAL IND.	3		1		4	
TOTAL DEP.		17			18	
TOTAL CLAIMS	20		22		22	

	CLAIMS					
	IND	DEP	IND	DEP	IND	DEP
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